

CITY OF FITCHBURG ✓ OK. 7-11-17

| CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN | | JUL 5 2017 RECEIVED OFFICE USE ONLY |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|---------------------------------------------------|
| Is This Report an Amendment: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| Instructions for completing schedules are on the back of each schedule. | | |
| COMMITTEE IDENTIFICATION | | |
| Name of Committee: <u>Friends of Shaw - Pfall</u> | | |
| Street Address: <u>5843 Schunong Dr</u> | | |
| City, State and Zip Code: <u>Fitchburg WI 53711</u> | | |
| Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. <input type="checkbox"/> | | |
| NAME OF REPORT | | |
| <input type="checkbox"/> January Continuing <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Spring <input type="checkbox"/> Fall <input type="checkbox"/> Special <input checked="" type="checkbox"/> July Continuing <u>2017</u> <input type="checkbox"/> Pre-Election <input type="checkbox"/> September Continuing <input type="checkbox"/> Termination Report also complete Schedule 4 | | |
| SUMMARY OF RECEIPTS AND DISBURSEMENTS | | |
| 1. RECEIPTS | Column A This Period | Column B Calendar Year-To-Date |
| 1A. Contributions (Including Loans) from Individuals | \$ — | \$ — |
| 1B. Contributions from Committees (Transfers-In) | \$ — | \$ — |
| 1C. Other Income and Commercial Loans | \$ — | \$ — |
| TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) | \$ — | \$ — |
| 2. DISBURSEMENTS | | |
| 2A. Gross Expenditures | \$ 300.00 | \$ 300.00 |
| 2B. Contributions to Committees (Transfers-Out) | \$ <u>300.00</u> | \$ <u>300.00</u> |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B) | \$ <u>300.00</u> | \$ — |
| CASH SUMMARY | | |
| Cash Balance Beginning of Report | \$ <u>322.78</u> | |
| Total Receipts | \$ — | |
| Subtotal | \$ <u>322.78</u> | |
| Total Disbursements | \$ <u>300.00</u> | |
| CASH BALANCE END OF REPORT | \$ <u>22.78</u> | |
| INCURRED OBLIGATIONS (Balance at the Close of This Period-3A) | \$ — | |
| LOANS (Balance at the Close of This Period-3B) | \$ — | |

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

| | | |
|---------------------------------------------------------------------|------------------------------------------------------------|-----------------------|
| Type or Print Name of Candidate or Treasurer: <u>Shawn Pfall</u> | Signature of Candidate or Treasurer: <u>Shawn Pfall</u> | Date: <u>07/05/17</u> |
| Email: | Daytime Phone: <u>(608) 628-3275</u> | |

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss. 11.1400, 11.1401, Wis. Stats.

ETHCF-2L (Rev. 01/16) The Wisconsin Ethics Commission prescribes this form. Completed forms must be filed with your local clerk.

Complete Con

Instructions for

| Date | Payee | Amount | Y-T-D Total |
|------------------------------------------------|-------------------------------------------------------------------|-----------|----------------------------|
| 11/9/17 | Friends of Jason Gonzalez 1400 Post Rd Elizabethtown, WI 53123 | 250.00 | 250.00 |
| 3/12/17 | Friends of Dave Mahoney for Sheriff PO Box 1463 Madison WI | 50.00 | 250.00 50.00 |
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| SUBTOTAL TRANS (Transfers Out) THIS PAGE | | \$ 300.00 | 300.00 |
| TOTAL TRANS (Transfers-Out) MADE TO COMMITTEES | | \$ 300.00 | 300.00 |